

THE UNITED STATES PATENT AND TRADEMARK OFFICE

Reply Under 37 C.F.R. 1.116 - Expedited Procedure - Technology Center 2600

In re Patent Application of

Yoko Fujiwara

Application No.: 09/875,081

Filing Date:

June 7, 2001

Group Art Unit: 2625

Examiner: Gregory M. Desire

Confirmation No.: 6215

Title: IMAGE PROCESSOR FOR CHARACTER RECOGNITION

AMENDMENT/REPLY TRANSMITTAL LETTER

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Encl	osed is a reply for the above-identified patent application.			
×	A Petition for Extension of Time is also enclosed.			
	Terminal Disclaimer(s) and the \$65.00 (2814) \$130.00 (1814) fee per Disclaimer due under 37 C.F.R. § 1.20(d) are also enclosed.			
	Also enclosed is/are			
	Small entity status is hereby claimed.			
X	Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the \$\square\$ \$\\$395.00 (2801) \square \$\\$790.00 (1801) fee due under 37 C.F.R. § 1.17(e).			
	Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.			
	Applicant(s) previously submitted			
	on, for which continued examination is requested.			
	Applicant(s) requests suspension of action by the Office until at least which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.			
	A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.			

Attorney Docket No. 018775-830

Application No. 09/875,081

No additional claim fee is required.
An additional claim fee is required, and is calculated as shown below.

		AM	IENDE	D CLAIMS			
	No. of Claims	Highest of Clai Previou Paid F	ms Isly	Extra Claims		Rate	Additional Fee
Total Claims	11	MINUS	20 =	0	x	\$50.00 (1202) =	\$ 0.00
Independent Claims	5	MINUS	5 =	0	х	\$200.00 (1201) =	\$ 0.00
If Amendment adds n	nultiple depen	dent claims,	, add \$	360.00 (1203)			
Total Claim Amendment Fee			\$ 0.00				
☐ Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee			\$ 0.00				
TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT			\$ 0.00				

X	A check in the amount of	\$ 1,240.00	_ is enclosed for the fee due.
	Charget	o Deposit Acco	ount No. 02-4800.
	Charge	to credit card.	Form PTO-2038 is attached.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BUCHANAN INGERSOLL PC

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Date: October 26, 2005

Ellen Marcie Emas

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